

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CITY OF DOTHAN AL
126 N. ST. ANDREW'S ST.
DOTHAN AL 36303

OSW 1172-F S+C

2. Article Number
(Transfer from service label)

7004 1160 0003 5812 2280

2595-02-M-1540

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

Signature

☐ Agent

☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

SCOTT DAVIS 12-15-05

D. Is delivery address different from item 1?

☐ Yes

☐ No

If YES, enter delivery address below:

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes